

NIAGARA HOCKEY SUMMER LEAGUE

WAIVER AND RELEASE OF LIABILITY Parental Consent (for skaters under the age of 18)

I, the undersigned acknowledge the inherent risks involved in ice hockey and all activities relating thereto. Accordingly and in consideration of being allowed to participate in any activities associated with NHSL, I agree to the following:

1. I acknowledge and fully understand that I will be engaging in activities that involve risk of serious injury, which may include permanent disability and even termination of life, and severe social and economic losses which might result not only from my action, but also from the action, inaction or negligence of others, through the rules of play or the condition of the premises, or any equipment used and further that there may be risks not known to me or not reasonably foreseeable by.

2. I agree that prior to participating in any activity associated with NHSL, I will inspect the competition area and all equipment used, and if, through my inspection, I determine that anything relating to the activity is unsafe, I will immediately advise my coach or an organization official to this unsafe condition and will not participate until this condition is corrected.

3. I agree to assume all the foregoing risks and accept personal responsibility for my own damages following such injury, permanent disability or termination of life.

4. I release, waive, discharge, and covenant not to sue NHSL, the arenas and/or all their respective agents, associates, officials, directors, owners, coaches, referees, and employees (collectively "releasees") from demands, losses, or damages on account of injury, termination of life, or damage to property, caused or alleged to be caused in whole or part by releasees or any other party's actions, inactions, or otherwise, and agree to indemnify releasees from any and all third party claims caused in whole or in part by my actions.

5. I acknowledge and agree to allow any form of media obtained by or given to NHSL or its media publishers, their employees including my name to be used for the purposes of team, websites, broadcast, print and or any other publicity and advertising purposes.

I, the undersigned parent or legal guardian have read the above waiver and release and agree to its terms on behalf of my child and myself. I understand that by signing below I am giving up substantial rights on behalf of my child and myself.

Date _____

Child's Name _____

Child's Birth – Year _____ Month _____ Day _____

(Please print) Parent Name _____

Parent Signature _____